

Congressman Earl Pomeroy

INTERNSHIP APPLICATION

Date:	Social Security Number:	Social Security Number:	
Name:(Last)		(MI)	
Present Address, City, State and Zip Code		()	
Present Phone #:	E-mail:		
Parent's Name:	Parent's Phone:		
Parent's Address, City, State, and Zip Cod	le:		
Name of High School:		Date of Graduation:	
Name of College/University:	Date of Gr	raduation:	
Major/Minor:	Advisor Name/Phone #:	Advisor Name/Phone #:	
Please rank order of preference, one through		Fargo Office	
Dates available:	Full or Par	Full or Part-time:	
II. REFERENCES List the names, addresses & phone number 1	`		

III. ADDITIONAL INFORMATION

Please send the following information along with this application and cover letter to:

Congressman Earl Pomeroy; 3003 32nd Ave S Suite 6 Fargo, ND 58103-6133

- 1. Cover Letter
- 2.Two letters of recommendation.
- 3. School transcript(s).
- 4. Brief essay, including the following information: work experience, experience in politics/government, academic honors, awards and leadership positions, office and computer skills, why you are interested in an internship with Congressman Pomeroy, and why you would be the best choice for an intern.

For more information, contact the intern coordinator at (701) 235-9760.